



**SOUTHWESTERN
INSTITUTE OF FORENSIC SCIENCES
AT DALLAS**

Office of the Medical Examiner

Autopsy Report



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DALLAS COUNTY
INSTITUTE OF FORENSIC SCIENCES

Case: IFS-20-03172 - ME

Decedent: Seegan, James Edward 62 years White Male DOB: [REDACTED]/1957

Date of Death: 02/19/2020 (Actual)

Time of Death: 05:24 PM (Estimated)

Examination Performed: 02/20/2020 07:55 AM

Body Weight: 155 lbs BMI: 22.24

Body Length: 70 in

ORGAN WEIGHTS:

Brain: 1,380 g	Right Lung: 360 g	Right Kidney: 130 g
Heart: 310 g	Left Lung: 440 g	Left Kidney: 170 g
Liver: 1,160 g	Spleen: 60 g	

EXTERNAL EXAMINATION

The body is identified by toe tag. Photographs, fingerprints, and a full body radiograph are taken. The hands are bagged.

When first viewed, the body is clad in a white T-shirt, gray sweatpants, and two gray socks. No jewelry is present. The hand bags are discarded, and the clothing is released.

The body is that of a well-developed, well-nourished white male whose appearance is compatible with the stated age of 62 years. The body, as received, weighs 155 pounds and is 70 inches long. There is good preservation in the absence of embalming. The body is cold, rigor is fully developed, and there is well-developed, blanching posterior lividity.

The scalp hair is short, white, and straight. A mustache and goatee are on the face. An average amount of body hair is in a normal distribution. The irides are blue, the corneae are clear, and there are no petechiae of the bulbar or palpebral surfaces of the conjunctivae. The ears, nose, and lips are unremarkable. The teeth are natural and in fair condition. The neck is unremarkable. The chest is symmetrical and the abdomen is flat and unremarkable. The external genitalia, anus, and perineum are unremarkable. The penis is circumcised and the testes are descended into the scrotum. The extremities are well-developed and symmetrical. The back is unremarkable.

IDENTIFYING MARKS AND SCARS

None are present.



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EVIDENCE OF THERAPY

None is present.

EVIDENCE OF INJURY

1. Contact gunshot wound of the head:

A gunshot entrance wound is on the left temple, centered 3-1/4 inch below the top of the head and 1/2 inch anterior to the superior attachment of the left ear. The gaping, stellate defect is reapproximated to reveal a 1/2 inch, round defect with a circumferential marginal abrasion up to 1/8 inch, and radiating marginal lacerations up to 1 inch. A muzzle stamp abrasion consisting of a small circle surrounded by a semicircle extends to 1/2 inch from the 7:00 margin. A small amount of soot is deposited within the wound track from 3:00 to 4:00. There is no stippling on the skin.

After perforating scalp and subscalpular tissue, the bullet sequentially perforates left temporal bone, left temporal lobe, right temporal lobe, right temporal bone, subscalpular tissue, and scalp.

A 1/2 inch, stellate exit wound is on the right temporal scalp, centered 2-1/2 inch below the top of the head and 1/2 inch posterior to the superior attachment of the right ear. A 1/8 inch marginal abrasion is clockwise from 12:00 to 6:00.

Associated with this wound is subscalpular hemorrhage underlying the entrance and exit wounds, as well as the occipital scalp. Linear fractures radiate from the entrance wound. There are comminuted fractures of the anterior cranial fossae, and a linear fracture of the occipital bone. Thin layered subdural hemorrhage is over the cerebral convexities. There is diffuse subarachnoid hemorrhage. The basal ganglia and thalami are contused. Blood is in the lateral, third, and fourth ventricles. The wound tract is hemorrhagic and pulpified. Sectioning of the lungs discloses a slight hemoaspiration pattern.

The trajectory of the bullet is left to right, front to back, and upward.

2. Other injury:

A 1/8 inch red abrasion is on the right second finger.

These injuries, having been once described, will not be repeated.

EVIDENCE SUBMITTED

The following are collected, sealed within appropriately labeled containers, and submitted to the Criminal Investigation Laboratory:

- Blood standard
- Gunshot residue kit.



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INTERNAL EXAMINATION

BODY CAVITIES: The thoracic and abdominal organs are in their normal anatomic positions. There are no adhesions or abnormal collections of fluid.

HEAD: See EVIDENCE OF INJURY. The spinal cord, as viewed from the cranial cavity, is unremarkable.

NECK: The soft tissues and prevertebral fascia are unremarkable. The hyoid bone and laryngeal cartilages are intact. The lumen of the larynx is not obstructed.

CARDIOVASCULAR SYSTEM: The intimal surface of the abdominal aorta is free of significant atherosclerosis. The aorta and its major branches and the great veins are normally distributed and unremarkable. The pulmonary arteries contain no thromboemboli. The pericardium, epicardium, and endocardium are smooth, glistening, and unremarkable. There are no thrombi in the atria or ventricles. The foramen ovale is closed. The coronary arterial system is free of significant atherosclerosis. The atrial and ventricular septa are intact. The cardiac valves are unremarkable. The myocardium is dark red-brown and firm, and there are no focal abnormalities.

RESPIRATORY SYSTEM: See EVIDENCE OF INJURY. The upper airway is unobstructed. The laryngeal mucosa is smooth and unremarkable, without petechiae. The pleural surfaces are smooth and glistening. The major bronchi are unremarkable. Sectioning of the lungs discloses a pink, mildly congested parenchyma.

HEPATOBIILIARY SYSTEM: The liver is covered by a smooth, glistening capsule. The parenchyma is dark red-brown and moderately congested. The gallbladder contains approximately 10 mL of green-brown bile with no calculi.

GASTROINTESTINAL SYSTEM: The esophageal mucosa is gray, smooth, and unremarkable. The stomach contains approximately 50 mL of tan mucoid material. There are no tablets or capsules. The gastric mucosa has normal rugal folds, and there are no ulcers. The small and large intestines are externally unremarkable. The appendix is present. The pancreas is unremarkable externally and upon sectioning.

GENITOURINARY SYSTEM: The capsules of both kidneys strip with ease to reveal smooth and slightly lobulated surfaces. The cortices are of normal thickness, with well-demarcated corticomedullary junctions. The calyces, pelves, and ureters are unremarkable. The bladder contains approximately 200 mL of clear yellow urine. The mucosa is gray, smooth, and unremarkable. The prostate is unremarkable externally and on sectioning.

ENDOCRINE SYSTEM: The thyroid and adrenal glands are unremarkable externally and upon sectioning.

LYMPHORETICULAR SYSTEM: The spleen is covered by a smooth, blue-gray, intact capsule. The parenchyma is dark red. The cervical, hilar, and peritoneal lymph nodes are unremarkable.

MUSCULOSKELETAL SYSTEM: The clavicles, ribs, sternum, pelvis, and vertebral column have no fractures. The diaphragm is intact.



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TOXICOLOGY:

Evidence Submitted:

The following items were received by the Laboratory from Forensic Pathology:

- 005: Biohazard Bag
- 005-001: Vitreous - red top tube
- 005-002: Skeletal muscle - plastic tube
- 005-003: Blood, femoral - gray top tube
- 005-004: Blood, femoral - gray top tube
- 005-005: Blood, femoral - gray top tube
- 005-006: Blood, femoral - gray top tube
- 005-007: Blood, femoral - red top tube
- 005-008: Urine - red top tube

Blood, postmortem

Acid/Neutral Screen (GC/MS)

none identified (Item# 005-005)

Alcohols/Acetone (GC)

negative (Item# 005-004)

Drug Screen (QTOF)

etomidate detected (Item# 005-005)

Vitreous

Alcohols/Acetone (GC)

negative (Item# 005-001)

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FINDINGS:

1. Contact gunshot wound of the head:
 - a. Entrance: Left temple.
 - b. Apparent range of fire: Contact, with muzzle stamp abrasion and soot deposition.
 - c. Injury: Perforation of brain; skull fractures; subdural and subarachnoid hemorrhage; cerebral contusions; hemoaspiration.
 - d. Exit: Right temple.
 - e. Trajectory: Left to right, front to back, and upward.
2. By history, the decedent was found unresponsive with a gunshot wound of the head and a gun in his left hand. A suicide type note was found on his computer.

CONCLUSIONS:

Based on the case history and autopsy findings, it is my opinion that James Edward Seegan, a 62-year-old white male, died as a result of a contact gunshot wound of the head. The autopsy findings and available investigative information are consistent with this being self-inflicted and deliberate.

MANNER OF DEATH: Suicide



04/01/2020

Emily Ogden, M.D.
Medical Examiner



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